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PTO/SB/21 (12-07)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/914,478
	Filing Date	August 24, 2001
	First Named Inventor	Stefan SCHERER
	Art Unit	
	Examiner Name	
Total Number of Pages in This Submission <u>4</u>	Attorney Docket Number	1999DE304

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavit/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation <input checked="" type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	PROPAT, LLC		
Signature	<i>Cathy Moore</i>		
Printed name	Cathy R. Moore		
Date	December 13, 2007	Reg. No.	45,764

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature	<i>Claire Wygand</i>		
Typed or printed name	Claire Wygand	Date	December 13, 2007

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/122 (01-06)

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CHANGE OF CORRESPONDENCE ADDRESS Application Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Application Number	09/914,478
	Filing Date	August 24, 2001
	First Named Inventor	Stefan Scherer
	Art Unit	
	Examiner Name	
	Attorney Docket Number	1999DE304

Please change the Correspondence Address for the above-identified patent application to:

☒ The address associated with Customer Number: 38263

OR

☒ Firm or Individual Name **ProPat, LLC**

Address
425-C South Sharon Amity Road

City **Charlotte** State **NC** Zip **28211**

Country **U.S.A.**

Telephone **(704) 365-4881** Email **Wygand@propatllc.com**

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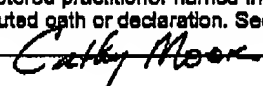
I am the:

☐ Applicant/Inventor

☐ Assignee of record of the entire interest.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ Attorney or agent of record. Registration Number **45,764**

☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

Signature 

Typed or Printed Name **Cathy R. Moore**

Date **December 13, 2007** Telephone **(704) 365-4881**

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of _____ forms are submitted.

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CENTRAL FAX CENTERAttorney Docket No. 1999DE304
Customer No. 38263

PATENT

DEC 13 2007

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Stefan SCHERER *et al.*

Patent No. 6,762,315 B2

Application No. 09/914,478

Granted: July 13, 2004

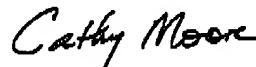
Filed: August 24, 2001

For: METHOD FOR PRODUCING
(1,1',4, 11'')-TERPHENYL COMPOUNDSStatement in Conformance with 37 CFR 3.73(b)Commissioner for Patents
Alexandria, VA 22313-1450Charlotte, North Carolina
December 13, 2006

Dear Sir:

A Power of Attorney, appointing Cathy R. Moore as a Practitioner of Record for Archimica GmbH., is attached. The above-referenced application has been assigned in its entirety to Archimica GmbH at Reel/Frame 018184/0765 on August 31, 2006. Copies of the assignment will be forwarded upon request. Accordingly, Cathy R. Moore is authorized to act on behalf of Archimica GmbH in the above-referenced application.

Respectfully submitted,

Cathy R. Moore
Reg. No. 45,764ProPat, L.L.C.
425-C South Sharon Amity Road
Charlotte, NC 28211-2841
Telephone: (704) 365-4881
Fax: (704) 365-4851
Customer No. 38263

DEC 13 2007

PTO/SB/80 (01-08)

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POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b).

I hereby appoint:

☒ Practitioners associated with the Customer Number:

38263

OR

☒ Practitioner(s) named below (If more than ten patent practitioners are to be named, then a customer number must be used):

Name	Registration Number	Name	Registration Number
Cathy R. Moore	45,764		
Klaus Schweitzer	L0086		

as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).

Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to:

☒ The address associated with Customer Number:

38263

OR

<input checked="" type="checkbox"/> Firm or Individual Name	ProPat, LLC		
Address	425-C South Sharon Amity Road		
City	Charlotte	State	North Carolina
Country	U.S.A.		
Telephone	704 365-4881	Email	moore@propatllc.com


Assignee Name and Address:

Archimica GmbH
Brueningstrasse 50
65929 Frankfurt Am Main
Germany

A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/98 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.

SIGNATURE of Assignee of Record

The individual whose signature and title is supplied below is authorized to act on behalf of the assignee

Signature		Date	22.09.2006
Name	Dr. Ralf PFIRRMANN	Telephone	+496196 757 8521
Title	Global Business Director		

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 36 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1460.

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